Criteria Checklist for Cilostazol (Pletal®)

VHA Pharmacy Benefits Management Strategic Healthcare Group and the Medical Advisory Panel

The following recommendations are based on current medical evidence and expert opinion from clinicians. The content of the document is dynamic and will be revised as new clinical data becomes available. The purpose of this document is to assist practitioners in clinical decision-making, to standardize and improve the quality of patient care, and to promote cost-effective drug prescribing. The clinician should utilize this guidance and interpret it in the clinical context of the individual patient situation.

Exclusion Criteria	***Response***
Patient with one of the following conditions: ❑ Patient with congestive heart failure ❑ Diagnosis of neurogenic claudication ❑ Active bleeding disorder (i.e.; peptic ulcer) ❑ Hypersensitivity to cilostazol ❑ Creatinine clearance <25 ml/min ❑ Severe liver failure (enzymes 3 times upper limit)	❑ yes ❑ no ***If yes to any condition patient is ineligible to receive cilostazol***
Inclusion Criteria	
❑ Patient with moderate to severe intermittent claudication ❑ Patient is not a candidate for surgical or catheter based interventions	❑ yes ❑ no ***If no to any condition patient is ineligible to receive cilostazol***
Non Pharmacologic Management	
❑ exercise therapy program http://www.nchpdp.med.va.gov/2004_VOTM.asp ❑ smoking cessation program as outlined in the VA/DoD Clinical Practice Guidelines at http://www.oqp.med.va.gov/cpg/TUC3/TUC_Base.htm ❑ weight reduction http://www.nchpdp.med.va.gov/2004_NAASO.asp ❑ control of diabetes, blood pressure, lipids as outlined in the VA/DoD Clinical Practice Guidelines at http://www.oqp.med.va.gov/cpg/cpg.htm	❑ yes ❑ no ***It is strongly recommended that patients be evaluated and an attempt made at risk factor reduction prior to cilostazol initiation.***
Dosing	
❑ Patient receiving therapy with an inhibitor of the CYP3A4 system (i.e.; erythromycin, ketoconazole, diltiazem, itraconazole). Cilostazol dose is 50 mg orally, twice daily ❑ Patient receiving therapy with an inhibitor of the CYP2C19 system (i.e.; omeprazole) Cilostazol dose is 50 mg orally, twice daily ❑ Patient on no interacting drug therapy. Cilostazol dose is 100 mg orally, twice daily. ❑ Cilostazol dose should be taken 30 minutes before or 2 hours after a meal	
Monitoring	
❑ Patients should be reevaluated at 6months to document any symptomatic improvement	❑ yes ❑ no ***If no, patient should have cilostazol therapy discontinued.***

Approved by Physician: _____ Date/time: _____

Patient name (last 4): _____ Reviewer: _____

approved_____